





2010 INDY/LISC NEIGHBORHOOD BROWNFIELD INITIATIVE

Sponsored through the public/private partnership of the following:

City of Indianapolis DMD Brownfield Redevelopment Program
Local Initiatives Support Corporation (LISC)
U.S. Dept. of Housing and Urban Development (HUD)

APPLICATION INFORMATION SHEET

Application Due Date: Applications accepted on a rolling basis

starting on 1st January, 2010

 Eight (8) copies <u>Or</u> an electronic file of completed application must be delivered to Chris Harrell at the City County Building, Office 2042 or received by email at <u>charrell@indygov.org</u>

Maximum Grant Award: \$10,000 (requires a Dollar for Dollar match)

- Match may be provided by applicant, through LISC by a separate agreement, a CDC, or another private entity.
- Maximum Award of \$10,000 may be increased if necessity for greater amount is established in additional explanation memo attached to application.

Eligible Entities: Not-For-Profit Organizations [Grant]

Eligible Activities: Environmental Assessment & Remediation

Activities

 When ranking applications, projects with an identified end reuse with direct public benefit will be given special consideration.

Questions or concerns with this application may be directed by email to Chris Harrell, Brownfield Redevelopment Coordinator for the City of Indianapolis at: charrell@indygov.org



Date





2010 INDY/LISC NEIGHBORHOOD BROWNFIELD INITIATIVE

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The City of Indianapolis, LISC, and HUD

Eight (8) copies <u>or</u> an electronic file of the completed applications must be submitted to the Brownfields Redevelopment Coordinator. If emailing the completed application please attach the file to an email addressed to: <u>charrell@indy.gov</u> <u>Or</u>, if submitting the application in paper form please deliver to Room 2042 on the 20th Floor of the City County Building at 200 East Washington Street, Indianapolis IN 46204. All applications will be reviewed in order of receipt until funds are exhausted.

| Received: |
|---|
| (To be stamped when received by City staff) |
| The Review Board will not discriminate against any applicant on the basis of race, color, sex, disability, sexual orientation, religion, age, national origin, or ancestry. |
| PROJECT SPONSOR INFORMATION |
| Project Sponsor's Name: |
| Project Title: |
| Sponsor Address (mailing and office if different): |
| |
| |
| |



Helping neighbors build communities





| Please Check One: | For-Profit | Not-For-Profit |
|------------------------|------------------|--|
| Federal ID #: | | |
| Contact Person: | | |
| Phone: | | |
| Title: | | |
| Fax: | | |
| Email: | | |
| | | Grant (For not-for-profit entities onl |
| \$_ | | Loan |
| \$_ | | Grant & Loan |
| I. GENERAL INFOR | MATION: | |
| 1. BROWNFIEL | D SITE INFORM | ATION: |
| Name: | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Zoned appropriately? | ? Yes | No |
| If no, please explain: | | |
| Are the property taxe | es current? Yes_ | No |
| If yes, please attach | confirming docum | nentation. |





| If no, p | ase explain: | |
|----------|--|-----|
| | | _ |
| Name: | OWNER INFORMATION (if different from above): | _ |
| | | |
| | | |
| State: | Zip: | |
| Phone | Fax: | |
| | assessment from owner (or trustee if in bankruptcy). A Right of Entry Formay be requested from Indianapolis Brownfield Redevelopment Program *Pursuant to Ind. Code 12-19-5 END USE | |
| | ease describe the intended re-use of this property including a timeline activities, benchmarks and letters of commitment. | |
| | HISTORY ovide a brief history of the site, including past uses, past owners, or cupants, and any efforts to redevelop the site. | |
| | BUDGET ease attach a project uses budget. Please provide a financial source led letters of commitment from each source. | ist |
| | ENVIRONMENTAL CONSULTANT INFORMATION: me: | |
| | dress: | _ |
| | y: | |
| | ate: Zip: | |





| LISC | |
|--|--|
| Helping neighbors build communities | |

| Phone: | Fax: | |
|-----------------|------|--|
| Contact Person: | | |

***Per City of Indianapolis HUD Action Plan Guidelines, applicants for sub grants must demonstrate competitive bidding has occurred for the professional environmental services to be conducted with this grant if received. Any grant over \$2000 shall require demonstration of at least three proposal responses to a RFP for the intended project. The Brownfield Redevelopment Coordinator can provide Technical Assistance to draft and advise on how to solicit an RFP for the intended project.

7. ASSESSMENT AND/OR REMEDIATION WORK PLAN

Attach the proposed assessment and/or remediation work plan. Please be detailed in describing work plans and itemized costs associated with each process.

8. LOCAL SUPPORT

Please attach minutes from public meetings, letters of support, and area development/redevelopment plans. Please provide documentation detailing your response to any negative comments concerning your project. Please attach a list of partners for this project.

II. COMMUNITY IMPACT

Discuss the impact this project will have on the community, including economic development and educational, recreational and housing needs. Discuss the marketability of the site, potential increased tax revenues to the applicant, potential job creation, previous efforts to redevelop the site, and any other relevant information about the project.

PLEASE LIMIT RESPONSE TO THIS QUESTION TO TWO TYPED PAGES.

III. ECONOMIC FACTORS

Briefly describe any relevant economic factors about the area in which the project is located, including census tract information. Please note if it is in an Urban Enterprise Zone, an Industrial Recovery Site (a "Dinosaur" Building), a federally designated Enterprise Zone or Community, a Brownfield Revitalization Zone, or any other specially designated area.

PLEASE LIMIT RESPONSE TO THIS QUESTION TO TWO TYPED PAGES.







IV. PAST ENVIRONMENTAL ASSESSMENTS

Have any site characterizations or assessments been performed on this property before? If so, please attach copies of these assessments and briefly explain the findings of the assessments.

PLEASE LIMIT RESPONSE TO THIS QUESTION TO TWO TYPED PAGES.

V. EXPERIENCE

Please detail your experience using federal and state grant and/or loan funds.

PLEASE LIMIT RESPONSE TO THIS QUESTION TO TWO TYPED PAGES.





The applicant certifies under penalty of perjury that the information provided in this application is true and correct to the best of her/his knowledge and belief.

| Name of Applicant/Organization |
|---|
| By: |
| (Person authorized to sign on behalf of the Applicant/Organization) |
| Title: |
| Date: |

Return this completed application to:

ATTN: Chris Harrell, Brownfield Redevelopment Coordinator charrell@indy.gov

or, by post:

City of Indianapolis
Department of Metropolitan Development
Community Economic Development Division
ATTN: Chris Harrell, Brownfield Redevelopment Coordinator
2042 City-County Building
200 East Washington Street
Indianapolis, IN 46204-3328